FÖRM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

1166138

FORM D
NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
JNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:							
SEC US	SE ONLY						
Prefix	Serial						
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DATE R	ECEIVED						
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08021795	•

Name of Offering	( check if this is an a	mendment and name I	nas changed, and i	ndicate change.)					
Limited Partnership	Interests of Maple Leaf	Partners, LP							
Filing Under (Check	box(es) that apply):	☐ Rule 504	☐ Rule 505	□ Rule 506	☐ Section 4(6)	ULOE			
Type of Filing:	■ New Filing				S	EC Mail.			
					Mail i	Processing			
		A. BASIC	DENTIFICAT	ION DATA	<b>S</b>	leation			
1. Enter the inform	nation requested about the	eissuer	*		14.81	0.7 200:			
Name of Issuer	check if this is an an	nendment and name h	as changed, and in	dicate change.	VAIY	22 2008			
Maple Leaf Partners	s, LP								
	<del></del>				Wash	ington DC			
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)									
c/o Maple Leaf Parti	to Maple Leaf Partners I, L.L.C., 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801								
Address of Principal			(Number and Stree	et, City, State, Zip Co	ode)   Telephone N	umber (Including Area Code)			
(if different from Exec	cutive Offices)								
Brief Description of B	Business: private inve	estment company			•	PROCESSED			
		<del></del>				GOCOSED _			
Type of Business Org	ganization					JAN 25 2000			
[	☐ corporation	🛛 limited p	artnership, already	formed	other (please s	pecify) 2005			
(	Dusiness trust	☐ limited p	artnership, to be fo	med		IHUMSON /			
			Month	Year		FINANCIAL			
Actual or Estimated [	Date of Incorporation or O	rganization:	1 1	0	1 🖾 Ad	tual Estimated			
Jurisdiction of Incorp	oration or Organization: (	Enter two-letter U.S. P	ostal Service Abbre	eviation for State:					
				r other foreign jurisdi	iction)	E			
						<del></del>			

### **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

not required to respond unless the form displays a currently valid OMB control number. A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Check Box(es) that Apply: Full Name (Last name first, if individual): Maple Leaf Partners I, L.L.C. Business or Residence Address (Number and Street, City, State, Zip Code): 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801 Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director Managing Member Full Name (Last name first, if individual): Dane C. Andreeff Business or Residence Address (Number and Street, City, State, Zip Code): c/o Maple Leaf Partners I, L.L.C., 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801 Check Box(es) that Apply: □ Promoter ⊠ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Tiger Partners, L.P. Business or Residence Address (Number and Street, City, State, Zip Code): c/o Maple Leaf Partners I, L.L.C., 450 Laurel Street, Suite 2105, Baton Rouge, LA 70801 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner □ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner □ Promoter Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ■ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

						В.	INFORM	MATION	ABOUT	OFFER	ING			
	<ol> <li>Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?</li></ol>													
1.	Has th	ne issue	r sold, or o	does the is	suer inten	d to sell, to Answer	o non-accr also in Ap <sub>l</sub>	redited inve pendix, Co	estors in th	is offering filing unde	? r ULOE.		☐ Yes	⊠ No
2.	What i	is the m	inimum in	vestment i	that will be	accepted	from any i	individual?	***************************************	************				,000,000* May be waived
3.	Does t	the offe	ring permi	t joint own	ership of a	single uni	t?				•••••		⊠ Yes	s □ No
	any co offerin and/or	ommissi ng. If a p r with a :	on or simi person to l state or st	lar remune be listed is ates, list th	eration for an associ ne name o	solicitation ated perso f the broke	of purcha on or agen or or deale	or will be pa sers in con it of a brok r. If more in the inform	nnection w er or deale than five (§	ith sales o er registere 5) persons	f securities d with the to be liste	s in the SEC d are		
Full Name (Last name first, if individual)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)													
	_	K "All St ]] [AK]										☐ [HI]	□ [ID]	☐ All States
	_	[(NI)	□ (iA)	_	(KY)			(MD)			_ [MN]			
□ [N	AT) [	] (NE)	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	[NC]	□ [ND]	□ (OH)	□ [OK]	□ [OR]	☐ [PA]	
<b>□</b> [F	RI] [	] [SC]	☐ [SD]	□ [TN]	□ (TX)	[TU]	[VT]	□ [VA]	□ [WA]	□ [WV]	□ [WI]	□ [WY]		
Full	vame (	(Last na	me first, if	individual	)									
Busir	ness or	r Reside	ence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Nam	e of As	sociate	d Broker o	or Dealer				-						· · · · · · · · · · · · · · · · · · ·
					cited or In			hasers						☐ All States
□ [A		] [AK]	□ [AZ]			•		□ (DE)				☐ (HI)	[OI]	
	_] [	] [IN]	□ [IA]	☐ [KS]	☐ [KY]	☐ [LA]	☐ [ME]	[MD]	[MA]	[MI]	[MN]	☐ [MS]	[MO]	
□ [N	(T)	] [NE]	□ (NV)	□ [NH]	[n]	□ [NM]	□ (NY)	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	[OR]	□ [PA]	
□ [F	ii) 🗀	] (SC)		[NT]	□ [TX]	□ [UT]	[VT]	□ [VA]	□ [WA]	□ (WV)	[WI]		□ [PR]	
Full N	lame (	Last na	me first, if	individual	)		-							
Busir	ness or	r Reside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip (	Code)						
Name	e of As	sociate	d Broker o	or Dealer										
		_			cited or Int			nasers						☐ All States
□ [A		_	☐ [AZ]			,		□ [DE]			☐ [GA]	[HI]	□ [ID]	<u> </u>
□ (II	.] [	] [IN]	□ [IA]	☐ [KS]		[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	[MN]	☐ [MS]	[MO]	
□ [N	IT) [	] [NE]	□ (NV)	□ (NH)	□ [NJ]	□ [MM]	□ (NY)	[NC]	☐ [ND]	[OH]			□ [PA]	
□ [R	i) [	[SC]	□ [SD]	[NT]	[TX]	[עדן] 🗆	[\(\text{VT}\)	[VA]	□ [WA]	[WV]	[WI]	[WY]	□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	<u>\$</u>	0	\$	0
	Equity	. <u>\$</u>	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	<u>\$</u>	0	\$	0
	Partnership Interests	. <u>\$</u>	100,000,000	\$	574,648,538
	Other (Specify)	. <u>\$</u>	0	\$	0
	Total	\$	100,000,000	\$	574,648,538
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		·		
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		215	<u>\$</u>	574,648,538
	Non-accredited Investors		0	<u>\$</u>	0
	Total (for filings under Rule 504 only)		0	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		n/a	<u>\$</u>	n/a
	Regulation A		n/a	\$	n/a
	Rule 504		n/a	\$	n/a
	Total		n/a	\$	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs		🗆	\$	. 0
	Legal Fees		🛛	\$	57,441
	Accounting Fees	•••••	🗖	\$	0
	Engineering Fees	•••••	🗆	\$	0
	Sales Commissions (specify finders' fees separately)	• • • • • • • • • • • • • • • • • • • •		\$	0
	Other Expenses (identify)		🗆	\$	0
	Total		🖾	\$	57,441

	C. OFFERING PRICE, NUMBI	ER OF INVESTORS, EXPE	NSES	AND USE OF PRO	CEEDS	<b>.</b>
4	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to l "adjusted gross proceeds to the issuer."	Part C–Question 4.a. This differer	ice is the		<u>\$</u>	99,942,559
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in res	any purpose is not known, furnish he total of the payments listed mu	an st equal			
	the adjusted gross processes to the issuel set to at in tes	porise for an o - goostion 1.0. at		Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$	_ 🗅	\$
	Purchase of real estate			<u>\$</u>		\$
	Purchase, rental or leasing and installation of ma	chinery and equipment		\$		\$
	Construction or leasing of plant buildings and fac			\$		\$
	Acquisition of other businesses (including the val	ue of securities involved in this				
	pursuant to a merger			\$	_ 🗆	\$
	Repayment of indebtedness			\$	_ 🗆	\$
	Working capital			\$	_ 🛛	\$ 99,942,559
	Other (specify):			\$	_ 🗆	\$
				\$	_ 🗆	\$
	Column Totals			\$	_ 🛛	\$9,942,559
	Total payments Listed (column totals added)			⊠ <u>\$</u>	9,942	559
		D. FEDERAL SIGNATUR	RE.			
CO	s issuer has duly caused this notice to be signed by the unstitutes an undertaking by the issuer to furnish to the U.S the issuer to any non-accredited investor pursuant to para	<ul> <li>Securities and Exchange Comm</li> </ul>	n. If this i	notice is filed under Rule on written request of its	e 505, the staff, the	following signature information furnished
Iss	uer (Print or Type)	Signature	1		Date	
Ma	ple Leaf Partners , LP	MACO	<u> </u>		Janua	ry 18, 2008
•	me of Signer (Print or Type) ne C. Andreeff	Title of Signer (Print or Type)  Managing Member of Maple Lo	U not Conit	all I C ita/Ganara	Dortner	
Da	ne C. Andreett	managing member or maple L	ear Capit	ai i, L.L.C., its Genera		<del></del>
	·					
				·		
		ATTENTION				
	Intentional misstatements or omiss	ions of fact constitute federal cr	iminal vi	olations. (See 18 U.S.	.C. 1001.)	

		E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 preser provisions of such rule?	tty subject to any of the disqualification	Yes 🖾 No		
	See Ap	pendix, Column 5, for state response.			
2.	<ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.</li> </ol>				
3.	The undersigned issuer hereby undertakes to fur	nish to the state administrators, upon written request, information	on furnished by the issuer to offerees.		
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burde of establishing that these conditions have been satisfied.				
	uer has read this notification and knows the content zed person.	s to be true and has duly caused this notice to be signed on its	behalf by the undersigned duly		
Issuer	(Print or Type)	Signature/	Date		
Maple	Leaf Partners , LP	(X J47)(P) ()	January 18, 2007		
Name	of Signer (Print or Type)	Title of Signer (Print or Type)			
Dane C	. Andreeff	Managing Member of Maple Leaf Capital I, L.L.C., its Ge	eneral Partner		

# Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

•	APPENDIX										
								1			
1	1	2	3			4		5			
	to non-a		Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)						
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
AL											
AK		•		•			•				
AZ		Х	\$100,000,000	1	\$1,022,447	0	\$0		х		
AR		Х	\$100,000,000	1	\$6,206,265	0	\$0		х		
CA		х	\$100,000,000	11	\$19,443,081	0	\$0		х		
со		Х	\$100,000,000	4	\$12,934,577	0	\$0		х		
СТ		Х	\$100,000,000	4	\$27,469,000	0	\$0		х		
DE											
DC		Х	\$100,000,000	3	\$4,602,590	0	\$0		X		
FL		Х	\$100,000,000	15	\$35,638,147	0	\$0		х		
GA		Х	\$100,000,000	1	\$2,216,690	0	\$0		х		
н											
ID											
IL.		Х	\$100,000,000	2	\$2,897,222	0	\$0		Х		
IN		Х	\$100,000,000	1	\$1,436,490	0	\$0		X		
IA		X	\$100,000,000	1	\$16,937,211	0	\$0		×		
KS		Х	\$100,000,000	1	\$519,055	0	\$0		X		
KY		Х	\$100,000,000	4	\$12,690,018	0	\$0		Х		
LA		Х	\$100,000,000	14	\$33,261,515	0	\$0		Х		
ME											
MD		X	\$100,000,000		\$4,265,743	0	\$0		X		
MA		Х	\$100,000,000	2	\$1,400,000	0	\$0		х		
MI		Х	\$100,000,000	1 .	\$1,492,800	0	\$0		X		
MN											
MS		Х	\$100,000,000	2	\$2,659,121	0	\$0		Х		
МО											
MT											
NE											
NV		X	\$100,000,000	6	\$25,445,680	0	\$0		Х		
NH											
NJ		X	\$100,000,000	5	\$8,063,480	0	\$0		Х		
NM		Х	\$100,000,000	1	\$1,000,000	0	\$0		×		

• *				АР	PENDIX	•				
1	2	2	3		4  Type of investor and  Amount purchased in State  (Part C – Item 2)					
	to non-ad	I to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)							
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
NY		Х	\$100,000,000	30	\$162,380,407	0	\$0		×	
NC	•	х	\$100,000,000	7	\$9,317,113	o	\$0		·x	
ND										
ОН										
ОК										
OR										
PA		Х	\$100,000,000	1	\$3,502,056	0	\$0		x	
RI										
sc							····			
SD										
TN		Х	\$100,000,000	19	\$37,881,203	0	\$0		X	
TX		Х	\$100,000,000	60	\$95,751,546	0	\$0		X	
UT		Х	\$100,000,000	1	\$2,140,029	0	\$0		X	
VT									-	
VA		X	\$100,000,000	14	\$38,365,622	0	\$0		X	
WA		<u> </u>		<u>.</u>					-	
WV									-	
WY										
Non									<del> </del> -	
US		Х	\$100,000,000	1 	\$395,845	0	\$0		Х	

